# **Disclosure Statement**

- The employees and/or speakers for this presentation have disclosed that they do not have any financial arrangements or affiliations with corporate organizations that either provide educational grants to this program or may be referenced in this activity.
- Furthermore, each of the previously named speakers has also attested that their discussions will not include any unapproved or off-label use of products.

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High-level Disinfection and Sterilization – All Steps, Each Time

APIC Hawaii Chapter July 22,2016

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# **Learning Objectives**

- Identify specific elements that contribute to high-level disinfection (HLD) or sterilization breaches and identify associated standards that assist in preventing HLD and sterilization breaches from occurring
- Illustrate the role of the Infection Preventionist to high-level disinfection and sterilization processes

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Superbug linked to 2 deaths at UCLA hospital; 179 potentially exposed

Superbug outbreak extends to Cedars-Sinai hospital, linked to scope

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# IC.01.03.01 Identifies Risk



- Location, community, population served
- FEP2
  - Care, treatment, services provided
- FEP3
  - Analysis of activities (data)
- F EP5
  - Prioritized identified risks

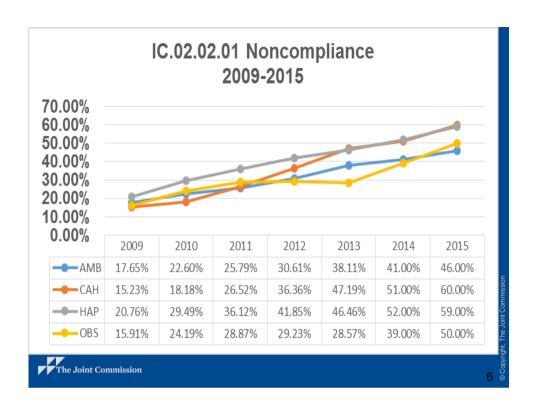
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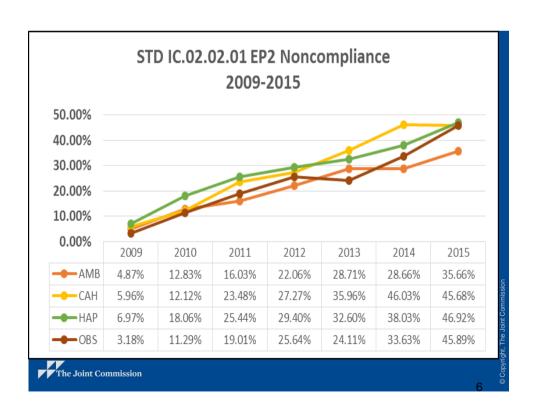
IC.02.02.01

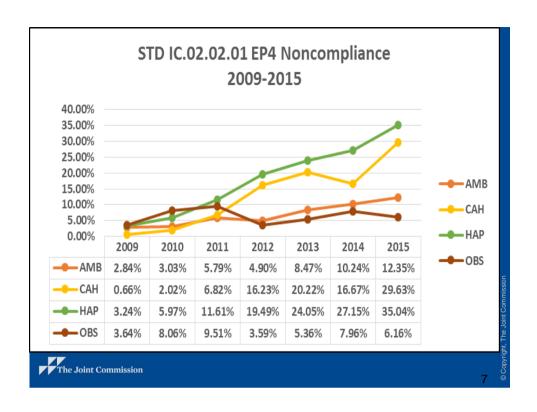


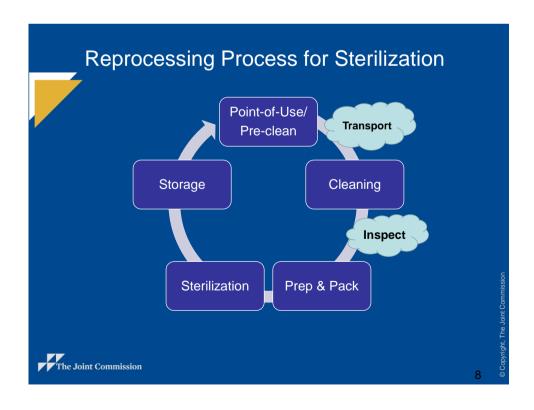
- ➤ EP2 Performing intermediate and high-level disinfection and sterilization of medical equipment, devices, and supplies
- ➤ EP4 Storing medical equipment, devices, and supplies

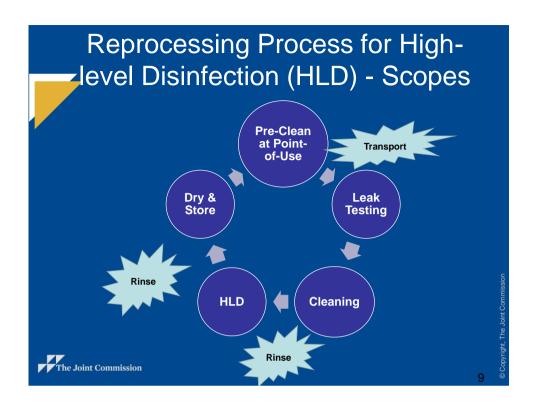
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# **Quality Monitoring of Sterilization**

- Mechanical/Physical Indicators
  - Displays, printouts
  - Indicates if equipment working properly
  - Not indicator of sterility



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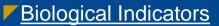


# Chemical Indicators

- Change color with timed exposure to heat, steam
- Used to show items have gone through sterilization process
- Not indicator of sterility



# **Quality Monitoring of Sterilization**



- Demonstrates bacterial spores on test strips or in vials/containers have all been killed
- Indicator of sterility

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# Quality Monitoring of HLD

- High-level disinfectants are prepared according to manufacturer's instructions for use
  - Length of time
  - Temperature
  - Documentation/logs
  - Test strips labeled, expiration date, follow instructions for use, correct test strip for solution



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# Areas of focus: **HLD** and Sterilization

- Staff competency and training of HLD and/or sterilization
  - HR.01.02.01 EP1
  - HR.01.04.01 EP4
  - HR.01.05.03 EP1
  - HR.01.06.01 EP's 5, 6
- Infection Control Practitioner (ICP) knowledge and surveillance of HLD/sterilization processes
  - HR.01.02.01 EP1
  - IC.01.01.01



# Areas of focus: **HLD** and Sterilization

- Managerial/Supervisor /ICP oversight, leadership knowledge, engagement, and support or lack thereof
  - LD.04.01.05 EP's 1,3,4
- Ventilation/pressure relationships
  - EC.02.05.01 EP 15
  - Physical layout/Space constraints
  - LD.04.01.11 EP's 2,5

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# Areas of focus: HLD and Sterilization

- Quality monitoring process and documentation HLD and sterilization
  - IC.02.02.01 EP2
- Evidence-based guidelines knowledge and use of
  - IC.01.05.01 EP1

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# Efficient Workflow - Lean Process

- Encompass reprocessing with related systems
  - Concentrate improvement effort on workflow
- Eliminate variability (waste)
- Automate
- Reduce error

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# Standardize Work Practices Determine process/best practice – Standardize to it Involve frontline staff Develop P&P Train/Re-educate Follow-up to assure sustainability and provide feedback



# Case Study #2 Sterilization

- No pre-cleaning at pointof-use
- Leaving hinged items in the closed position
- No documentation of sterilizer preventative maintenance/cleaning
- No BIs with implant loads

- ▼ No IC involvement
- Premature releasing of IUSS
- No competency, training of frontline staff on file
- Manager of OR has oversight with no competency/training

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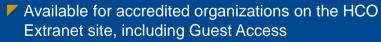
# What do you do or say?

- A. Do or say nothing.
- B. Opportunity to re-educate and train staff on HLD and sterilization processes.
- C. Reprocess all probes and instruments involved in these breaches.
- D. Both B and C.

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# For Consideration ..... Internal/System resources What can/is immediately corrected Leadership response Infection Control involvement Patient risk, look-back, notification





Applicable to hospitals, critical access hospitals, ambulatory, and office-based surgery settings.

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# **HLD & Sterilization BoosterPak**

- Targeted audience:
  - frontline staff conducting HLD and sterilization
  - Supervisor/manager of HLD and sterilization
  - Infection Preventionists
- Goal: To ensure HLD and sterilization practices are conducted according to regulatory standards and evidence-based guidelines, in order to minimize the potential risk of infection to patients.

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## Resources



- 2008 CDC Guideline for Disinfection and Sterilization in Healthcare Facilities.
- ANSI/AAMI ST58:2013 Chemical Sterilization and high-level disinfection in healthcare facilities
- ANSI AAMI ST91:2015 Flexible and semi-rigid endoscope processing in health care facilities
- ANSI/AAMI ST79:2010 & A1:2010 & A2:2011 & A3:2012 (Consolidated Text) Comprehensive guide to steam sterilization and sterility assurance in health care facilities

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### Resources



- 2016 SGNA Standards of Infection Control in Reprocessing of Flexible Gastrointestinal Endoscopes
- 2014 APIC Text of Infection Control and Epidemiology. 4th edition.
- 2016 AORN Recommended Practices for Perioperative Nursing – Sterilization and Disinfection
  - o Disinfection High-level
  - o Flexible Endoscopes Cleaning and Processing



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# Questions

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